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Global health and foreign policy

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Global health and foreign policy

The General Assembly,

Recalling its resolutions 63/33 of 26 November 2008, 64/108 of 10 December 2009 and 65/95 of 9 December 2010,

Recalling also the outcomes of the major United Nations conferences and summits in the economic, social and related fields, especially those related to global health,

Reaffirming the commitment to the achievement of all the Millennium Development Goals, in particular Goals 4, 5 and 6, in the context of the outcome document of the 2010 High-level Plenary Meeting of the General Assembly on the Millennium Development Goals entitled "Keeping the promise: united to achieve the Millennium Development Goals",[1] and in this regard, welcoming the report of the Commission on Information and Accountability for Women's and Children's Health,

Welcoming the Political Declaration on HIV and AIDS: Intensifying our Efforts to Eliminate HIV and AIDS,[2] the outcome of the High-level Meeting of the General Assembly on HIV and AIDS, held in New York, from 8 to 10 June 2011, and reaffirming the political will to effectively implement the commitments contained therein,

Welcoming also the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases,[3]

[1] See resolution 65/1.
[2] Resolution 65/277, annex.
[3] Resolution 66/2, annex.

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adopted by the General Assembly on 19 September 2011, and reaffirming the political will to effectively implement the commitments contained therein,

Welcoming further the Rio Political Declaration on Social Determinants of Health, adopted at the World Conference on Social Determinants of Health, held in Rio de Janeiro, Brazil, from 19 to 21 October 2011,

Noting with concern that for millions of people throughout the world, the right to the enjoyment of the highest attainable standard of physical and mental health, including access to medicines, still remains a distant goal and that in many cases, especially for children and those living in poverty, the likelihood of achieving this goal is becoming increasingly remote,

Acknowledging that inequities in access to health care can increase during times of crisis, particularly for persons living with disabilities, and that special efforts should be made to maintain public health-care and primary health-care functions during these periods,

Acknowledging also that improvement of unfavourable social and economic conditions is primarily a social and economic policy issue and that most of the underlying risk factors for tuberculosis, malaria, HIV and AIDS and maternal and infant mortality, as well as for non-communicable diseases, are associated with social and economic conditions,

Recognizing that health inequities arise from social determinants of health, that is, the societal conditions in which people are born, grow, live, work and age, and that these determinants include experiences in the early years, education, economic status, employment and decent work, housing and environment, and effective systems of preventing and treating ill health,

Bearing in mind the long-term health consequences of exposure to nuclear radiation for the affected populations and the need for the international community to be better prepared to respond collectively, including through the full implementation of the International Health Regulations,[4]

Recalling that according to the Intergovernmental Panel on Climate Change,[5] projected exposure to climate change is likely to affect the health status of millions of people, particularly those with low adaptive capacity,

Noting the role of the Foreign Policy and Global Health Initiative in promoting synergy between foreign policy and global health, as well as the contribution of the Oslo Ministerial Declaration,[6] which was reaffirmed, with renewed actions and commitments, by the Ministerial Declaration of 22 September 2010,[7]

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[4] World Health Organization, *International Health Regulations (2005)*, 2nd ed. (Geneva, 2005).

[5] See *Climate Change 2007: Synthesis Report — Contribution of Working Groups I, II and III* to the *Fourth Assessment Report of the Intergovernmental Panel on Climate Change* (Geneva, 2008).

[6] A/63/591, annex.

[7] See A/65/538.

Welcoming the adoption by the Sixty-fourth World Health Assembly on 24 May 2011 of its resolution WHA64.5 on pandemic influenza preparedness: sharing of influenza viruses and access to vaccines and other benefits,[8]

1. *Notes with appreciation* the note by the Secretary-General[9] and the recommendations on improving coordination, coherence and effectiveness of governance for global health and addressing the social determinants of health contained therein;

2. *Calls for* more attention to health as an important cross-cutting policy issue in the international agenda;

3. *Encourages* Member States to continue to consider the close relationship between global health and foreign policy and to recognize that global health challenges entail concerted and sustained efforts to further promote a global policy environment supportive of global health;

4. *Invites* Member States to adopt a multisectoral approach, while taking into consideration the social determinants of health, with a view to reducing health inequities and enabling sustainable development, and stresses the urgent need to act on social determinants for the final push towards the achievement of the Millennium Development Goals, to protect economic and social development and to recognize the importance of universal coverage in national health systems, especially through primary health-care and social protection mechanisms, including nationally determined social protection floors, so as to provide access to health services for all, in particular the poorest segments of the population;

5. *Reiterates* the need to fully implement the International Health Regulations,[4] as part of the emergency responses to health and environment-related issues;

Health and environment

6. *Reaffirms* that human beings are at the centre of concerns related to sustainable development and are entitled to a healthy and productive life in harmony with nature;

7. *Also reaffirms* the leading role of the World Health Organization and the important role of the United Nations system in meeting the challenges of global health in a changing environment and enhancing the visibility of health issues in the different international forums;

8. *Further reaffirms* the United Nations Framework Convention on Climate Change[10] and the objectives and principles set out therein and the commitment to enable the full, effective and sustained implementation of the Convention, in order to achieve its ultimate objective;

9. *Urges* Member States to intensify efforts to address, as appropriate, the social determinants of exposure to environmental hazards and their current and projected consequences on health;

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[8] See World Health Organization, *Sixty-fourth World Health Assembly, Geneva, 16-24 May 2011, Resolutions and Decisions, Annexes* (WHA64/2011/REC/1).

[9] A/66/497.

[10] United Nations, *Treaty Series*, vol. 1771, No. 30822.

10. *Calls for* more attention to health-related issues in the global environmental agenda as well as for more attention to environmental issues in the health agenda and calls on the international community to acknowledge the direct linkages between health and the environment;

11. *Urges* Member States to promote at all levels the integration of health concerns, including of people living in vulnerable situations, into strategies, policies and programmes for poverty eradication and sustainable development;

12. *Encourages* the development of multisectoral policies with a view to limiting not only the detrimental impact of human intervention and environmental degradation but also the current and projected consequences of climate change for health;

13. *Encourages* Member States to link health and the environment in their national development plans and, through education and training at all levels, to develop national capacities to better prevent diseases related to the environment;

14. *Reaffirms* that national and international policies on environmental protection have, pursuant to their development, a beneficial effect on health;

15. *Stresses* the need to foster research on environmental risk factors and social determinants of health;

16. *Also stresses* the need to strengthen national monitoring mechanisms for measuring the impacts of the environment on health, identifying emerging risks and evaluating the progress made and to strengthen national risk assessment and early warning mechanisms for identifying, assessing and addressing health vulnerabilities posed by environmental degradation;

17. *Calls for* increased international, regional and subregional cooperation and assistance, including through the mobilization of resources and the transfer of knowledge, technology and expertise, on mutually agreed terms, so as to enhance developing countries' capacity to manage risks, including through the development and sustainability of the infrastructure and scientific, technological, technical and institutional capacities needed to research, observe, analyse, map and, where possible, forecast natural and environmental hazards, vulnerabilities and disaster impacts;

18. *Reiterates* the importance of launching international capacity-building initiatives that assess health and environmental linkages and use the knowledge gained to create more effective national and regional policy responses to environmental threats to human health;

19. *Encourages* in this regard greater international cooperation on sharing best practices and providing technical assistance and assistance in capacity-building to developing countries in the implementation of their national policies;

20. *Encourages* Member States to take into consideration the important role of health for the achievement of sustainable development, including in the context of the United Nations Conference on Sustainable Development;

Health and natural disasters

21. *Expresses grave concern* at the increase in the number of people affected by natural disasters and stresses the need to address their health needs;

22. *Underlines* the crucial role of health in emergency preparedness and response to natural disasters as well as the need to fully integrate health in strategies for disaster risk reduction and sustainable recovery;

23. *Recognizes* the primary role of national and local authorities in responding to disasters and the leading role of the World Health Organization as the lead of the Global Health Cluster, in the provision of humanitarian assistance by the United Nations system, and as a partner of the International Strategy for Disaster Reduction, in supporting relief efforts and enhancing preparedness to disasters;

24. *Also recognizes* the clear relationship among emergency response, rehabilitation and development, and reaffirms that, in order to ensure a smooth transition from relief to rehabilitation and development, emergency assistance in natural disasters must be provided in ways that will be supportive of recovery and long-term development and that emergency measures should be seen as a step towards sustainable development;

25. *Welcomes* the adoption by the sixty-fourth World Health Assembly on 24 May 2011 of its resolution 64.10, on strengthening national health emergency and disaster management capacities and resilience of health systems,[8] as well as the adoption on 20 May 2011 of its resolution 64.1, on the implementation of the International Health Regulations (2005) and on 24 May 2011 of its resolution 64.24, on drinking water, sanitation and health; [8]

26. *Stresses* the continued need for coordination in natural disasters among the Office for the Coordination of Humanitarian Affairs of the Secretariat, the World Health Organization, other relevant United Nations organizations, humanitarian organizations, the World Bank and regional development banks so as to enhance effectiveness of health responses and to strengthen preparedness and response capacity of national and local health authorities, in close coordination with national Governments, taking into account the primary and leading role of the affected State in the initiation, organization, coordination and implementation of such assistance within its territory;

27. *Recognizes* the important role of the International Strategy for Disaster Reduction in monitoring the implementation of the Hyogo Framework for Action 2005-2015: Building the Resilience of Nations and Communities to Disasters,[11] including in the health sector;

28. *Encourages* Member States to strengthen all-hazards health emergency and disaster risk-management programmes, including disaster risk reduction, emergency preparedness and response, water and sanitation and epidemic control, and integrate them into national and international health plans;

29. *Urges* Member States to intensify efforts, as appropriate, to address the social determinants of vulnerabilities to disasters and their current and projected consequences for health;

30. *Underlines* the importance of strengthening the preparedness of health systems for emergencies, including through programmes on safe and prepared hospitals and training for health-care workers;

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[11] A/CONF.206/6 and Corr.1, chap. I, resolution 2.

31. *Encourages* Member States to strengthen the involvement of communities in disaster preparedness and response in order to enhance their resilience;

Follow-up actions

32. *Urges* Member States to continue to consider health issues in the formulation of foreign policy;

33. *Requests* the Secretary-General, in close collaboration with the Director-General of the World Health Organization and with the participation of relevant programmes, funds and specialized agencies of the United Nations system, as well as other relevant multilateral institutions, as appropriate, and in consultation with Member States, to give high priority to generating and collecting comparable and reliable data on the interlinkages between health and environment, and health and natural disasters, and to submit to the General Assembly at its sixty-seventh session, under the item entitled "Global health and foreign policy", a report which reflects on these interlinkages and contains recommendations for improving the management of health risks arising from environmental disasters.